CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

DATE 9F REPORT 2.a. NAME OF CANDIDATE OR COMMITTEE
7/24/12 Gelena Buttle for assessor
2.b. IF COMMITTEE, NAME OF CANDIDATE 3. ELECTION DATE
Jeleny Gutler 89-12
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State, Zip Code Phone
200 Manulastures Rd + 2016 Chatt - In 20405 757-954
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)
Street or Rural Route 129 Will Mult 54 #413 Chatte, State Zip Code Phone 432 9764
5. OFFICE SOUGHT (include district number, if applicable) 6. NAME OF POLITICAL TREASURER (may be candidate)
Samultor Co-Jay assessor Lucla G- denderson
7. CATEGORY OR REPORT (Check one)
FIRST SECOND THIRD FOURTH PRE- PRE- MID-YEAR YEAR-END
QUARTER QUARTER QUARTER QUARTER PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 8.2. BEGINNING DATE OF REPORTING PERIOD 8.5. ENDING DATE OF REPORTING PERIOD
7-1-12
9. (Check one)
a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)
b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000
and/or expenditures total more than \$1,000 for this reporting period.
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. Signature of candidate date signature of political treasurer date
agriculture of continuate
11. WITNESS SIGNATURE
(mol 1) Hedrings 2/25/12 Per 10 Holen 1/25/10
signature of witness date signature of witness date
Signature of witness age
12. SUMMARY
a. BALANCE ON HAND LAST REPORTs 5643.60
b. Total receipts this period
c. TOTAL DISBURSEMENTS THIS PERIODs 2702.62
d. BALANCE ON HAND (12.a. plus 12.b. mínus 12.c.)
e. TOTAL LOANS OUTSTANDING 2 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2
12 1111 26
f. TOTAL OBLIGATIONS OUTSTANDING ALCOHOM S

SUMMARY PAGE - CANDIDATE

12 NAME OF CANDIDATE OF COMMITTEE (In Full)	14 REPORT COVERING THE REPION								
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	FROM: 7/-/ TO: 7-)6/1								
RE¢EIPTS	7770 10010								
15. CONTRIBUTIONS (other than loans and interest)	111 0								
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 175, NULL								
b. Itemized Contributions (over \$100 from each source this period)	\$ 750,704 Hoor a								
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	**************************************								
16. LOANS RECEIVED THIS REPORTING PERIOD	\$0								
17. INTEREST RECEIVED THIS REPORTING PERIOD	17. INTEREST RECEIVED THIS REPORTING PERIOD								
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	* ************************************								
DISBURSEMENTS									
19. EXPENDITURES (other than loan payments)									
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	e.g., printing, postage, gasoline)								
Mileage 1440@ 519 remi \$ 820.1	12								
Meetingrul 1 myraige adjusais quarkers \$ 289.0	00								
Printing Couly & Sample Gallotte \$ 59.	39								
Pote cardo a stanon s 73.6	68								
Office supplies \$ 9811	18								
Com House of Ha - down Gooney of \$ 1300	64								
last stood for Da reamy Channey = 1500	48								
Manuful da 44 D holl man 10 - Signal a 34	nle								
The share of the state of the s	10								
tagpel charger \$ 1011	0								
Total of Expenditures (\$100 or less each payee)	\$ 1672.73								
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 1029-89								
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 2700,162								
20. LOAN REPAYMENTS MADE THIS PERIOD	s <u>-0</u> -								
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>270262</u>								
22.IN-KIND CONTRIBUTIONS									
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$								
b. Itemized in-kind contributions (over \$100 from each source this period)	\$								
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.	.b.)\$								
23. OBLIGATIONS									
a. Unitemized Obligations Outstanding (\$100 or less each)	\$								
b. Itemized Obligations Outstanding (Over \$100 each)	\$								
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i ite	em 12.f.)\$								

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

First Name Marthe Last Name Organization Name Emery Address 7/2 Munro 42 City Challenboga Occupation Self Employer Employer Cartiques Ala	TIONS FROM PRECEDING PAGEACH ITEMIZED CONTRIBUTION (or Middle Naithe	E (enter \$0 if first itemized page) ontributions totaling more than \$100 from any contribute Contribution Received For: Primary Election Runoff (Local Elections Only) Date of Contribution	TO: 7-26-12- Amount of Contribution All 100 Aggregate This Election
First Name Juna Last Name/Organization Name Address 519 Feru Ju City Lignel Nutu- Occupation Retired Employer	Middle Name	Contribution Received For: Primary Election Runoff (Local Elections Only) Date of Contribution	Amount of Contribution ## 100 Aggregate This Election
Employer Employ	Middle Name Owe State of Zip 2 de 350 with a state of the state of	Contribution Received For: Primary Election (General Election) Runoff (Local Elections Only) Date of Contribution	Amount of Contribution #50 Aggregate This Election
Last Name Crangeton Name Adoress 735 Gardon S City Shatlanaga Compation Westweet M Employer Authors Adoress 736 Gardon S City Shatlanaga Compation Compation Of S Compation Comp	Middle Name Self a Zing ode 402 Self a Viger Self a Vig	Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Date of Contribution ### 18/12	Aggregate This Election
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional page (if this is the last page of contributions, this amount in			\$ 50000

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1 NAME OF CANDIDATE OF COMMITTEE	~~~	<i>N</i>	***************************************	2. REPORT COVER	ING THE PERIOD	
1. NAME OF CANDIDATE OF COMMITTEE	tor l	asessos		FROM: 7-1-12	TO: 4-26-12	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTION	Amount					
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	***************************************)	
First Name	Middle Name		Contribution Received For:		Amount of Contribution	
Last Nagh-Organization Damy Real Estate assoc.	- 3	Pealtoir		General Election	#250	
901 15th ave. Sout	le.	PAC	Runoff (Local Election	is Only)		
Carlielle	SIMO	3252	Date of Contribution		Aggregate This Election	
Occupation			1/20/12		\$250	
Employer						
First Name	Middle Nam	9	Contribution Received For		Amount of Contribution	
Last Name/Organization Name	L		Primary Election [General Election		
Address			Runoff (Local Election	ns Only)		
City	State Zip Code Date of Contribution					
Occupation	<u> </u>				10 mm	
Employer	**************************************	***************************************	4.0			
First Name	Middle Nam	8	Contribution Received Fo	geo	Amount of Contribution	
Last Name/Organization Name			Primary Election	General Election		
Address			Runoff (Local Election	ons Only)		
City	State	Zip Code	Date of Contribution	Aggregate This Election		
Occupation	L		1		O de la companya de l	
Employer						
First Name	Middle Nan	ne	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name	<u> </u>	**************************************	☐ Primary Election	General Election		
Address		noquisión den orden orden est establique de discondination de de mesos de contration de la	Runoff (Local Electi	ons Only)		
City	State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation	a Accessorate Contraction Cont	an the commence of the contract of the contrac				
Employer						
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages (If this is the last page of contributions, this amount must					\$250.80	

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RDA 1159

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	u Assessor		2. REPORT COVER						
Golden Guille fo	TO:11-26-12								
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	0 /	-0-							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)									
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Narde/Business Name	egni	signi		# 543.26					
Address 301 Thomas Gren		,							
Cottsboro "	State ZipCode 35769								
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name Budiness Name		2 no print a	assessee	#102.68					
Address 21/6 Samulton	Place blud-	Ousiness	cords	1090					
Chatl-	State Zip Code 3744								
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name/Business Name Hardware		Posts for Dangaign		4115.02					
Address 2700 5. Show St		Dangaign	signi	7,5,0					
Chathenooga	State Zip Code 374	V -	•						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name/Business Name Address. Address.	tamant	Canypa	reals	#/62.78					
1278 mounes St	State 4 Tip Code								
Chatlayouga	State Zip Code 21402								
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
	t Restaurant	Caryo	nege meals	@ 106.15					
Address - Machet St.	In I 7: 0 :	1	preace	4700112					
Chatle very	State Zip Code 37403								
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name/Business Name	•								
Address									
City	State Zip Code								
5. TOTAL ITEMIZED EXPENDITURES	(4)			1/1/29 0g					
(Carry forward to item 3. of next page if additional page: (If this is the last page of expenditures, this amount must	the state of the s			\$ 1,029,89					

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR CO	JWINII : EE				2. REPORT COVE	RING THE PERIOD			
					FROM	TO:			
3. TOTAL ITEMIZED IN-KIND CO	NTRIBUTIONS	FROM	PRECEDING PAGE	(enter \$0 if first itemized name	1	Amount			
4. COMPLETE THE APPROPRIATE I					V	Ontributor during the period			
Fits! Name		Middle Nam		In-Kind Contribution Receive					
				Primary Election	Value of In-Kind Contribution				
Last Name/Organization Name				Runoff (Local Electio	ns Only)				
Address				Date of in-Kind Contribution	Date of In-Kind Contribution				
City	ty State Zip Code			Description of In-Kind Contribution					
Occupation	Employer								
First Name		Middle Nan	KB	In-Kand Contribution Receive	ed For:	Value of In-Kind Contributor			
Last Name/Organization Name				Primary Election	General Election				
			***************************************	Runoff (Local Election	nns Only)				
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution	1				
Occupation	Епроуег	······································							
First Name		Middle Nan	ne	In-Kind Contribution Receiv		Value of In-Kind Contribution			
Last Name/Organization Name					General Election				
Andrews			***************************************	Runoff (Local Election	ons Only)				
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of in-Kind Contribution	15				
Occupation	Employer								
First Name		Middle Nar	ne	In-Kind Contribution Receiv		Value of In-Kind Contribution			
Last Name/Organization Name					General Election				
Address				Runoff (Local Election	ons Only)				
A10 655				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of in-Kind Contributio	n .				
Occupation	Employer	***************************************							
First Name		Middle Nam	©.	In-Kind Contribution Recei		Value of in-Kind Contribution			
Last Name/Organization Name				Primary Election					
Accress				Runoff (Local Election	ins Only)				
				Date of in-Kind Contribution		Aggregate this Election			
Oty		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer								
5. TOTAL ITEMIZED IN-KIND CO	ONTRIBITION	ıc							
(Carry forward to item 3, of next page 8	additional pages of	this form a	re used.)						
If this is the last page of in-kind contrib SS-1128 (Rev. 2/06)	utions, this amount	must be sh	own in item 22b, of summa	(V.)	6 0	-0-			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE	OR COMMITTEE						2. F			NG T TO:	HE PERIOD	
3. COMPLETE THE APPR	ROPRIATE ITEMS F	FOR EACH I	TEMIZ	ZED LOAN (loans totaling n	nore than \$100	from any source	during the peri	iod)			
Complete the Following for th	e Source of the Loan											
					Loan Balance Loans of Period) Received			Loan Payments		Outstanding Loan Balance (End of Period)		
Last Name/Organization Name												
Address Loan Recei						Conoral	Election	Date of Loan	1			
City	State	Zip Code			Primary Election ☐ General Election Runoff (Local Elections Only)							
	List All Endo	rsers or Guara	antors f	or Above Loa	n (If more spa	ce is needed	d please attach	a page)				
First Name		Middle Name	"		First Name		-	and appear	Middle	Name	A second of the second of	
Last Name/Organization Name		4		100	Last Name/Or	ganization Nar	me					
Address					Address							
City		State	Zip C	ode	City				State		Zip Code	
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	ding					
First Name	First Name Middle Name				First Name Middle Name							
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City		State	Zip C	ode	City State Zip					Zip Code		
Amount Guaranteed Outstanding					Amount Guara	inteed Outstan	ding					
First Name		Middle Name	9		First Name				Middle	e Name		
Last Name/Organization Name		-			Last Name/Or	ganization Na	me					
Address					Address					100		
City		State	Zip C	ode	City				State		Zip Code	
Amount Guaranteed Outstanding					Amount Guara	inteed Outstan	ding					
First Name		Middle Name	9		First Name Middle Name							
Last Name/Organization Name		1			Last Name/Or	ganization Nar	me					
Address					Address							
City		State	Zip C	ode	City				State		Zip Code	
Amount Guaranteed Outstanding				100	Amount Guara	inteed Outstan	ding					
4. Totals for all Loans (com (Total loans received should also	be shown in item 16. on	summary page.	.)		Outstanding L (Beginning		Loans Received	Loai Payme			tanding Loan Baland (End of Period)	
(Total loan payments should also (Total outstanding loan balance s						0-	-0-		0 -	-	-0-	

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD			
				FROM:	TO:			
 COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period) 			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)		
First Name	Middle Na	me						
Last Name/Business Name								
Address								
City	State Zip Code					,		
Description of Obligation	, the							
First Name	Middle Na	me						
Last Name/Business Name								
Address								
City	State	Zip Code						
Description of Obligation					35.91.2			
First Name	Middle Na	me						
Last Name/Business Name			_					
Address								
City	State Zip Code							
Description of Obligation								
First Name	Middle Na	me						
Last Name/Business Name				1,54				
Address								
City	State	Zip Code						
Description of Obligation	1				1			
First Name	Middle Na	me						
Last Name/Business Name								
Address								
City	State	Zip Code						
Description of Obligation								
4. TOTALS								
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	column mus	st also be shown				-0-		

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